



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1418

<b>SERIAL NUMBER</b> 10/693,232	<b>FILING OR 371(c) DATE</b> 10/24/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> .0112995.00128US
------------------------------------	---	---------------------	-------------------------------	--

**APPLICANTS**

Stephen A. Raymond, Charlestown, MA;  
 Geoffrey E. Gordon, Boston, MA;  
 Daniel B. Singer, Weymouth, MA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 09/940,129 08/27/2001 PAT 6,640,134 which is a DIV of 09/447,986  
 11/23/1999 PAT 6,282,441  
 which is a CON of 09/001,032 12/30/1997 PAT 6,095,985  
 which is a CON of 08/394,157 02/24/1995 PAT 5,778,882

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 01/23/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 3
Verified and Acknowledged	Examiner's Signature <u>S</u> Initials				

**ADDRESS**

23483

**TITLE**

Health monitoring system

<b>FILING FEE RECEIVED</b> 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
---------------------------------------	---	---